

February 4, 2008

EPA IDENTIFICATION NUMBER:

**SUBJECT: ANNUAL SMALL QUANTITY GENERATOR REPORTING FOR CALENDAR YEAR 2007**

The Administrative Rules of Montana (ARM) regulations require large and small generators of hazardous waste to file an annual report by March 1 for the previous calendar year's activities (i.e. calendar year 2007 report is due no later than March 1, 2008.)

Enclosed are the forms and instructions for completing your annual hazardous waste report for calendar year 2007. Please read the instructions very carefully so that your report will accurately reflect your 2007 activities. Complete all sections that relate to your hazardous waste activities.

The report must be submitted to this office by March 1, 2008. **You may be subject to enforcement action if you do not file by that date.** Please send the report to:

Waste and Underground Storage Tank Management Bureau  
Hazardous Waste Section  
P.O. Box 200901  
Helena, MT 59620-0901

The assessment of the annual Hazardous Waste registration fee and invoice will be mailed about May 2008.

If you have any questions, or encounter difficulties in completing the report, please contact: Iver Johnson (ILJ), (406) 444-5852 or Robert Reinke (RDR), (406) 444-1435 of the Hazardous Waste Regulatory Unit. Your state contact is listed in Part One, Section II of your 2006 Hazardous Waste Report.

Sincerely,



Mark Hall  
Hazardous Waste Section Supervisor

Enclosures: 2007 Generator Annual Hazardous Waste Report Forms  
2007 Generator Annual Hazardous Waste Report Instructions

## 2007 MONTANA SMALL GENERATOR HAZARDOUS WASTE REPORT

This report is for the calendar year ending December 31, 2007. Please read all instructions in the Yellow 2007 Hazardous Waste Report Instructions Booklet before making any entries on form. PLEASE TYPE / PRINT

### PART ONE

**Mailing Date: 2/4/2008**

▶ (Please make corrections in space provided on form)	<b>I</b>	<b>GENERATOR STATUS DURING 2007</b>  <i>See instructions for generator status definitions and check correct box.</i>	Status: « <b>SITE_STAT_TYPE_DESC</b> » Class Currently Register as: « <b>SITE_TYPE</b> »		Onetime Generator: « <b>SITE_ONE_TIME_IND</b> » Annual Report Required: « <b>SITE_RPT_REQ</b> »	
			Status during 2007 <input type="checkbox"/> <b>L</b> arge Generator <input type="checkbox"/> <b>S</b> mall Generator <input type="checkbox"/> <b>C</b> onditionally <b>E</b> xempt Generator		<input type="checkbox"/> Non-Handler <input type="checkbox"/> Out of Business <input type="checkbox"/> One Time Generator	
	<b>II</b>	<b>EPA ID NUMBER / STATE CONTACT PERSON</b>	<b>EPA ID</b>	<b>CONTACT PERSON</b>		
	<b>III</b>	<b>GENERATOR NAME</b>				
	<b>IV</b>	<b>SITE LOCATION ADDRESS</b>				
	<b>V</b>	<b>MAILING ADDRESS</b>				
	<b>VI</b>	<b>CONTACT PERSON / TITLE / PHONE</b>				
		<b>ALTERNATE CONTACT / TITLE / PHONE</b>				
<b>FAX NUMBER / EMAIL ADDRESS</b>		<b>FAX</b>	<b>EMAIL</b>			
<b>VII</b>	<b>OWNER /</b>					
	<b>LEGAL BUSINESS NAME</b>					

### PART TWO - WASTE IDENTIFICATION (See Instructions)

A	B	C	D	E	F
Description of Waste	EPA Hazardous Waste Codes	Amount of Waste Generated	Unit of Measure / Density	Amount Shipped Off-Site	EPA ID Number & Transporter Name EPA ID Number & Receiving Facility Name
1					
2					
3					

(NOTE: PART TWO CONTINUED ON NEXT PAGE)

### PART THREE - Certification

(Please Print or Type)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents. I believe that the submitted information is true, accurate, and complete. I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

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(Name - Please Print)

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Title

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Signature

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Date Signed

**PART TWO – Continuation** *(Please make copies of this sheet for additional pages)*

A		B				C	D	E	F	
Description of Waste		EPA Hazardous Waste Codes				Amount of Waste Generated	Unit of Measure / Density	Amount Shipped Off-Site	EPA ID Number & Transporter Name EPA ID Number & Receiving Facility Name	
4										
5										
6										
7										
8										
9										
10										
11										
12										

Comments

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